Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
DISTRICT OF OREGON		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is o	n Jessica	
	your government-issued picture identification (for		First name
	example, your driver's	Joy Anne	
	license or passport).	Middle name	Middle name
	Bring your picture identification to your	Clingenpeel	
	meeting with the trustee	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you h used in the last 8 year		
	Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4796	

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	88188 5th Street Veneta, OR 97487 Number, Street, City, State & ZIP Code Lane County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2 lives at a different address: Number, Street, City, State & ZIP Code County If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case number (ii	known)
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(Form 2010)). A ■ Chapter 7 □ Chapter 11 □ Chapter 12		f each, see <i>Notice Required by</i> page 1 and check the appropriate	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.					
☐ Chapter 11☐ Chapter 12☐								
☐ Chapter 12		■ Chapter 7						
	☐ Chapter 11							
Charter 12								
☐ Chapter 13								
8. How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, can order. If your attorney is submitting your payment on your behalf, your attorney may pay with a pre-printed address.								
			on, sign and attach the Application for Individuals to Pay					
-		(Official Form 103A).	only if you are filing for Chapter 7. By law, a judge may,					
but is not applies to	required to, waive yo your family size and	our fee, and may do so only if you I you are unable to pay the fee in	ur income is less than 150% of the official poverty line that installments). If you choose this option, you must fill out ial Form 103B) and file it with your petition.					
9. Have you filed for bankruptcy within the last 8 years?								
Distr	ct	When	Case number					
Distr		When	Case number					
Distr		When	Case number					
	·							
■ No								
☐ Yes.								
Debt	or		Relationship to you					
Distr	ct	When	Case number, if known					
Debt	or		Relationship to you					
Distr	ct	When	Case number, if known					
□Na GO	to line 12							
		ned an eviction judament against	t vou?					
— 165.			, you:					
_	Yes. Fill out <i>Initi</i>	al Statement About an Eviction J	Judgment Against You (Form 101A) and file it with this					
	Yes. Has	Yes. Has your landlord obtain No. Go to line 1: Yes. Fill out <i>Initia</i>	Yes. Has your landlord obtained an eviction judgment agains No. Go to line 12.					

Par	t3: Report About Any Bu	sinesses	You Owi	n as a Sole Propriet	or
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	e and location of bus	iness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name	e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numl	oer, Street, City, Stat	e & ZIP Code
	it to this petition.		Chec	k the appropriate box	x to describe your business:
				Health Care Busin	ness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	efined in 11 U.S.C. § 101(53A))
				Commodity Broke	r (as defined in 11 U.S.C. § 101(6))
				None of the above	
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a small business deadlines. If you indicate that you are a small business debtor, you must attach your mo operations, cash-flow statement, and federal income tax return or if any of these docume in 11 U.S.C. 1116(1)(B).				a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure	
	For a definition of small	■ No.	I am not filing under Chapter 11.		
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.		
		☐ Yes.	I am	filing under Chapter	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	Have Any	/ Hazardo	ous Property or Any	y Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and	☐ Yes.	What is	the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is , why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where i	s the property?	
					Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Part	6: Answer These Questi	ons for R	eporting Purposes			
16.	What kind of debts do you have?	16a.		ly consumer debts? Con- personal, family, or housel		fined in 11 U.S.C. § 101(8) as "incurred by an
			☐ No. Go to line 16b.			
			Yes. Go to line 17.			
		16b.		ly business debts? Busin investment or through the		s that you incurred to obtain siness or investment.
			☐ No. Go to line 16c.			
			☐ Yes. Go to line 17.			
		16c.	State the type of debts ye	ou owe that are not consu	mer debts or busine	ess debts
17.	Are you filing under Chapter 7?	□ No.	I am not filing under Cha	pter 7. Go to line 18.		
	Do you estimate that after any exempt property is excluded and	■ Yes.		r 7. Do you estimate that a e available to distribute to		perty is excluded and administrative expenses ?
	administrative expenses are paid that funds will		■ No			
	be available for distribution to unsecured creditors?		☐ Yes			
18.	How many Creditors do you estimate that you owe?	■ 1-49 □ 50-99		☐ 1,000-5,000 ☐ 5001-10,000 ☐ 10,001-25,0	0	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than100,000
		☐ 100-1 ☐ 200-9		— 10,001 20,0	,,,,	in more than 100,000
19.	How much do you estimate your assets to	\$0 - \$		□ \$1,000,001 □ \$10,000,001		□ \$500,000,001 - \$1 billion
	be worth?		01 - \$100,000 001 - \$500,000	□ \$10,000,00° □ \$50,000,00°	1 - \$50 million 1 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$1 million	\$100,000,00	01 - \$500 million	☐ More than \$50 billion
20.	How much do you estimate your liabilities	\$0 - \$		\$1,000,001		□ \$500,000,001 - \$1 billion
	to be?		001 - \$100,000	□ \$10,000,00°	1 - \$50 million 1 - \$100 million	☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
			001 - \$500,000 001 - \$1 million		01 - \$500 million	☐ More than \$50 billion
Part	7: Sign Below					
For	you	I have ex	amined this petition, and I	declare under penalty of	perjury that the infor	mation provided is true and correct.
						e, under Chapter 7, 11,12, or 13 of title 11, choose to proceed under Chapter 7.
				did not pay or agree to pay ad the notice required by 1°		ot an attorney to help me fill out this
		I request	relief in accordance with t	the chapter of title 11, Unit	ed States Code, spe	ecified in this petition.
		bankrupt and 3571	cy case can result in fines I.	up to \$250,000, or impriso		or property by fraud in connection with a years, or both. 18 U.S.C. §§ 152, 1341, 1519,
		Jessica	sica Joy Anne Clingen Joy Anne Clingenpe		Signature of Debto	or 2
		Signature	e of Debtor 1			
		Executed	d on April 2, 2019 MM / DD / YYYY		Executed on	M / DD / YYYY
					IVIII	

Case	num	ber	(if known)
------	-----	-----	------------

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Tomas K. Butcher Signature of Attorney for Debtor	Date	April 2, 2019 MM / DD / YYYY
Tomas K. Butcher 082807 Printed name		
Butcher Law Office, LLC Firm name		
116 Highway 99 N #101 Eugene, OR 97402		
Number, Street, City, State & ZIP Code Contact phone (541) 762-1967	Email address	tom@butcherlawoffice.com
082807 OR Bar number & State		_

United States Bankruptcy CourtDistrict of Oregon

In re	Jessica Joy Anne Clingenpeel		Case N		
		Debtor(s)	Chapte	er <u>7</u>	
	DISCLOSURE OF COMPI	ENSATION OF ATTO	ORNEY FOR	DEBTOR(S)	
	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the fil be rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankrupt	cy, or agreed to be p	oaid to me, for services i	
	For legal services, I have agreed to accept		\$	1,200.00	
	Prior to the filing of this statement I have received			700.00	
	Balance Due			500.00	
2.	The source of the compensation paid to me was:				
	■ Debtor □ Other (specify):				
3.	The source of compensation to be paid to me is:				
	■ Debtor □ Other (specify):				
4.	■ I have not agreed to share the above-disclosed com	npensation with any other pers	on unless they are n	nembers and associates	of my law firm.
	☐ I have agreed to share the above-disclosed comper copy of the agreement, together with a list of the n				law firm. A
5.	In return for the above-disclosed fee, I have agreed to	render legal service for all asp	ects of the bankrupt	cy case, including:	
	 a. Analysis of the debtor's financial situation, and rendebtor. b. Preparation and filing of any petition, schedules, stoc. c. Representation of the debtor at the meeting of credit d. [Other provisions as needed] Negotiations with secured creditors to reaffirmation agreements and applicat 522(f)(2)(A) for avoidance of liens on h 	atement of affairs and plan whaters and confirmation hearing reduce to market value; of ions as needed; preparati	ich may be required and any adjourned exemption planni	; hearings thereof; ng; preparation and	filing of
6.	By agreement with the debtor(s), the above-disclosed fine Representation of the debtors in any depth of the debtors in any debtors.			ances, relief from sta	v actions or
	any other adversary proceeding.	,,,,, ,, ,, ,, ,, ,	diciai lien avoida		iy actions of
	any other adversary proceeding.	CERTIFICATION	Idiciai ilen avoida		iy actions of
	any other adversary proceeding. I certify that the foregoing is a complete statement of a pankruptcy proceeding.	CERTIFICATION			
this b	I certify that the foregoing is a complete statement of a pankruptcy proceeding.	CERTIFICATION any agreement or arrangement	for payment to me f		
this b	I certify that the foregoing is a complete statement of a	CERTIFICATION any agreement or arrangement /s/ Tomas K. B Tomas K. Butch Signature of Attor Butcher Law O 116 Highway 9 Eugene, OR 97	for payment to me futcher her 082807 rney ffice, LLC 9 N #101 402 Fax: (541) 762-1	or representation of the	

UNITED STATES BANKRUPTCY COURT DISTRICT OF OREGON

	DISTRICT	OF OREGON	
In re) Case I	No.	(If Known)
Jessica Joy Anne Clingenpeel)		
	,	PTER 7 INDIVIDUAL DEBTO EMENT OF INTENTION(S)	K'S*
Debtor(s)		1 U.S.C. §521(a)	
IMPORTANT NOTICES TO DEBTOR(S):			
1. Complete, sign and file this form even if you have no occeditors are listed, make sure the certificate of service is		roperty of the estate or personal	property subject to unexpired leases. If
2. Failure to perform the intentions as to property stated	below within 30 d	ays after the first date set for the	e Meeting of Creditors
under 11 USC §341(a) may result in relief for the creditor	or from the Autom	atic Stay protecting such proper	ty.
PART A - Debts secured by property of the estate. (Paradditional pages is necessary.)	t A must be fully o	completed for each debt which i	s secured by property of the estate. Attach
☐ IF NONE - Check this box.			
Property No. 1 Creditor's Name:		Describe Property Secur	ring Debt
The Equitable Finance Company		Describe 1 Toperty Secur	ing Dest.
Property will be (check one): ☐ SURRENDERED	RETAINED		
 □ Redeem the property ■ Reaffirm the debt ■ Other. Explain (for example, avoid lien using 11 United Property is (check one): ■ CLAIMED AS EXEMPT PART B - Personal property subject to unexpired leases pages if necessary.) 	□ NOT CLAII	MED AS EXEMPT	
☐ IF NONE - Check this box.			
Property No. 1			
Lessor's Name: D	escribe Leased P	nonontre	T: 11 h J 4 11
	urniture	roperty:	Lease will be assumed pursuant to 11 USC §365(p)(2) ■ YES □ NO
		toperty:	USC §365(p)(2)
Continuation sheets attached (if any). I DECLARE UNDER PENALTY OF PERJURY THAT THE INDICATES INTENTION AS TO ANY PROPERTY OF SECURING A DEBT AND/OR PERSONAL PROPERTY AN UNEXPIRED LEASE.	E ABOVE MY ESTATE	I/WE, THE UNDERSIGNED DOCUMENT AND LOCAL CREDITOR NAMED ABOY	USC §365(p)(2) YES NO O, CERTIFY THAT COPIES OF BOTH THIS FORM #715 WERE SERVED ON ANY
Continuation sheets attached (if any). I DECLARE UNDER PENALTY OF PERJURY THAT THE INDICATES INTENTION AS TO ANY PROPERTY OF SECURING A DEBT AND/OR PERSONAL PROPERTY	E ABOVE MY ESTATE	I/WE, THE UNDERSIGNED DOCUMENT AND LOCAL	USC §365(p)(2) YES NO O, CERTIFY THAT COPIES OF BOTH THIS FORM #715 WERE SERVED ON ANY
Continuation sheets attached (if any). I DECLARE UNDER PENALTY OF PERJURY THAT THE INDICATES INTENTION AS TO ANY PROPERTY OF SECURING A DEBT AND/OR PERSONAL PROPERTY AN UNEXPIRED LEASE.	E ABOVE MY ESTATE	I/WE, THE UNDERSIGNED DOCUMENT AND LOCAL CREDITOR NAMED ABOY	USC §365(p)(2) YES NO O, CERTIFY THAT COPIES OF BOTH THIS FORM #715 WERE SERVED ON ANY
Continuation sheets attached (if any). I DECLARE UNDER PENALTY OF PERJURY THAT THE INDICATES INTENTION AS TO ANY PROPERTY OF SECURING A DEBT AND/OR PERSONAL PROPERTY AN UNEXPIRED LEASE. DATE: April 2, 2019	E ABOVE MY ESTATE	I/WE, THE UNDERSIGNED DOCUMENT AND LOCAL CREDITOR NAMED ABOVE DATE: April 2, 2019	USC §365(p)(2) YES NO O, CERTIFY THAT COPIES OF BOTH THIS FORM #715 WERE SERVED ON ANY VE. 082807 OF

521.05 (12/1/16) **Page 1**

NON-JUDICIAL REMEDY WHEN CONSUMER DEBTOR FAILS TO TIMELY PERFORM STATED INTENTIONS

Creditors, see <u>Local Form #715</u> [attached if this document was served on paper] if you wish information on how to obtain non-judicial relief from the automatic stay of 11 U.S.C. §362(a) as to your collateral.

OUESTIONS????

Call an attorney with questions about these procedures or the law. However, only call the debtor's attorney if you have questions about the debtor's intent as to your collateral.

						4/02/19 7:53PM
Fill	in this inform	ation to identify your case	:			
Deb	otor 1	Jessica Joy Anne Cli First Name	ngenpeel Middle Name	Last Name		
	otor 2 use if, filing)	First Name	Middle Name	Last Name		
` `	-		STRICT OF OREGON			
Cas	e number					
(if kno					_	heck if this is an mended filing
					<u> </u>	mondod ming
Off	ficial For	m 106Sum				
			Liabilities and	l Certain Statistical Information		12/15
infor	mation. Fill o	ut all of your schedules fir	st; then complete the	re filing together, both are equally responsible information on this form. If you are filing amen the box at the top of this page.	ded sch	
						lue of what you own
1.		B: Property (Official Form 155, Total real estate, from 5			\$	0.00
	1b. Copy line	62, Total personal property	, from Schedule A/B		\$	11,295.00
	1c. Copy line	63, Total of all property on	Schedule A/B		\$	11,295.00
Part	2: Summa	rize Your Liabilities				
						our liabilities nount you owe
2.		Creditors Who Have Claims total you listed in Column A		Official Form 106D) e bottom of the last page of Part 1 of <i>Schedule D</i>	\$	3,750.00
3.		: Creditors Who Have Unse total claims from Part 1 (pri		form 106E/F) from line 6e of <i>Schedule E/F</i>	\$	0.00
	3b. Copy the	total claims from Part 2 (no	npriority unsecured clai	ms) from line 6j of Schedule E/F	\$	16,954.29
				Your total liabilities	\$	20,704.29
				rour total habilities		20,704.23
Part	3: Summa	rize Your Income and Exp	enses			
4.		our Income (Official Form 1 mbined monthly income from			\$	2,155.54
5.		Your Expenses (Official Form onthly expenses from line 22			\$	2,114.00
Part	4: Answer	These Questions for Adm	inistrative and Statist	ical Records		
6.	-	g for bankruptcy under Ch have nothing to report on the	•	ck this box and submit this form to the court with y	our othe	er schedules.
7.	YesWhat kind of	debt do you have?				
				bts are those "incurred by an individual primarily fo for statistical purposes. 28 U.S.C. § 159.	r a pers	onal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information

page 1 of 2

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

2,256.75

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total clai	m
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	5,176.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	5,176.00

						4/02/19 7:53PN
Fill in	this info	ormation to identify your case	e and this filing:			
Debto	r 1	Jessica Joy Anne Cl	ingenpeel			
		First Name	Middle Name	Last Name		
Debto	r 2 e, if filing)	First Name	Middle Name	Last Name		
` '	. 0,			Last Name		
United	d States	Bankruptcy Court for the: DIS	STRICT OF OREGON			
Casa	number				,	7 Objects for the second
Case	Humber			_		 Check if this is an amended filing
~ ···						
Offic	<u>cial F</u>	orm 106A/B				
Sch	nedu	ıle A/B: Proper	tv			12/15
In each think it informa	category fits best.	r, separately list and describe iter Be as complete and accurate as ore space is needed, attach a se	ms. List an asset only once. If a possible. If two married people	are filing together, both a	are equally responsible for sup	plying correct
Part 1:	Descri	be Each Residence, Building, Lar	nd, or Other Real Estate You Ow	n or Have an Interest In		
1. Do y	ou own o	or have any legal or equitable inte	erest in any residence, building,	land, or similar property?		
■ N	lo. Go to F	Part 2.				
ΠY	es. Wher	re is the property?				
	_	,				
Part 2:	Descri	be Your Vehicles				
■ Y	'es Make:	GMC	Who has an interest in th	e property? Check one	Do not deduct secured clai the amount of any secured	
	Model:	Yukon	Debtor 1 only		Creditors Who Have Claim	
	Year:	2002	Debtor 2 only		Current value of the	Current value of the
	Approxin	nate mileage: 195000	Debtor 1 and Debtor 2 of	only	entire property?	portion you own?
	Other inf	ormation:	At least one of the debte	ors and another		
			Check if this is commit (see instructions)	unity property	\$1,500.00	\$1,500.00
Example 1	mples: B No Yes Id the do ges you Descrit	aircraft, motor homes, ATVs oats, trailers, motors, personal ollar value of the portion you have attached for Part 2. Write Your Personal and Household or have any legal or equitable	watercraft, fishing vessels, sn own for all of your entries fr te that number here	owmobiles, motorcycle a	ny entries for	\$1,500.00 urrent value of the ortion you own?
		goods and furnishings Major appliances, furniture, line	ens, china, kitchenware			o not deduct secured aims or exemptions.
	•	,	,,			
Official	Form 10	06A/B	Schedule A/B:	Property		page

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				4/02/19 7:53PM
Debtor 1	Jessica Joy	Anne Clingenpeel C	ase number (if known)	
■ Ye	s. Describe			
		General household goods, furnishings and electronics, e	st.	\$500.00
7 Electr	aniaa			
7. Electr Exam	nples: Televisions a including cel	nd radios; audio, video, stereo, and digital equipment; computers, printe phones, cameras, media players, games	ers, scanners; music c	ollections; electronic devices
☐ Ye	s. Describe			
	other collecti	figurines; paintings, prints, or other artwork; books, pictures, or other arons, memorabilia, collectibles	rt objects; stamp, coin,	or baseball card collections;
	s. Describe			
Exam	musical instr	graphic, exercise, and other hobby equipment; bicycles, pool tables, go	olf clubs, skis; canoes	and kayaks; carpentry tools;
■ No □ Ye	s. Describe			
10. Firea Exai ■ No	mples: Pistols, rifle	s, shotguns, ammunition, and related equipment		
_	s. Describe			
□ No	<i>mples:</i> Everyday cl	othes, furs, leather coats, designer wear, shoes, accessories		
■ Ye	s. Describe			¢400.00
		Clothing, est.		\$100.00
□ No	<i>mples:</i> Everyday je	welry, costume jewelry, engagement rings, wedding rings, heirloom jew	elry, watches, gems, ç	gold, silver
		Jewelry, est.		\$25.00
13 Non-	farm animals			
Exa	mples: Dogs, cats,	birds, horses		
■ No □ Ye	s. Describe			
14. Any ■ No	•	d household items you did not already list, including any health aid	ds you did not list	
	s. Give specific inf	ormation		
		of all of your entries from Part 3, including any entries for pages you number here	ou have attached	\$625.00
Part 4:	Describe Your Finan	cial Assets		
Do you	own or have any l	egal or equitable interest in any of the following?		Current value of the

portion you own?
Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 2

D	ebtor 1	Jessica Joy	Anne C	lingenpeel	Case number (if known)	
16.	16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ■ No □ Yes					
17.					counts; certificates of deposit; shares in credit unions, brokerage houses, and oth ts with the same institution, list each.	er similar
					Institution name:	
			17.1.	savings	Oregon Community Credit Union, est.	\$3,000.00
			17.2.	checking	Oregon Community Credit Union, est.	\$20.00
18.				ly traded stocks ent accounts with b	prokerage firms, money market accounts	
	☐ Yes			Institution or issue	er name:	
19.	Non-pul joint ve		tock and i	interests in incor	porated and unincorporated businesses, including an interest in an LLC, pa	rtnership, and
		Give specific in		about themne of entity:	% of ownership:	
20.	Negotia Non-ne	able instruments	s include p	ersonal checks, ca	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and money orders. ransfer to someone by signing or delivering them.	
	■ No □ Yes. G	Give specific inf		about them uer name:		
04	Datinom	ant ar nanaiar				
21.		ent or pensior les: Interests in			403(b), thrift savings accounts, or other pension or profit-sharing plans	
	☐ Yes. L	ist each accou		ely. of account:	Institution name:	
22.	Your sh		ed deposit	s you have made s	so that you may continue service or use from a company t, public utilities (electric, gas, water), telecommunications companies, or others	
					Institution name or individual:	
					Security deposit with EPUD, est.	\$400.00
					Security deposit with landlord, est.	\$400.00
23.	Annuitie	es (A contract f	or a period	dic payment of mor	ney to you, either for life or for a number of years)	
	☐ Yes	ls	ssuer nam	e and description.		
24	26 U.S.C	s in an educati c. §§ 530(b)(1),			qualified ABLE program, or under a qualified state tuition program.	
	■ No □ Yes	lr	nstitution n	ame and description	on. Separately file the records of any interests.11 U.S.C. § 521(c):	

Official Form 106A/B Schedule A/B: Property

page 3

Debtor 1	Jessica Joy Anne Clinge	enpeel Case number (if known	n)
25. Trusts	s, equitable or future interests i	in property (other than anything listed in line 1), and rights or powers ex	xercisable for your benefit
	Give specific information about	them	
Exam		de secrets, and other intellectual property bisites, proceeds from royalties and licensing agreements	
■ No □ Yes.	Give specific information about	them	
Exam ■ No		licenses, cooperative association holdings, liquor licenses, professional licer	nses
☐ Yes.	Give specific information about	them	
Money or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
_	funds owed to you		
■ No □ Yes.	Give specific information about	them, including whether you already filed the returns and the tax years	
29. Family Exam ■ No		ony, spousal support, child support, maintenance, divorce settlement, proper	ty settlement
	Give specific information		
□ No	ples: Unpaid wages, disability ins benefits; unpaid loans you Give specific information	surance payments, disability benefits, sick pay, vacation pay, workers' comp made to someone else	ensation, Social Security
□ No	benefits; unpaid loans you		ensation, Social Security \$750.00
□ No ■ Yes. 31. Interese Exam ■ No	benefits; unpaid loans you Give specific information sts in insurance policies ples: Health, disability, or life insurance tompany o	Net wages for work performed yet unpaid, est. urance; health savings account (HSA); credit, homeowner's, or renter's insure of each policy and list its value.	\$750.00 ance
□ No ■ Yes. 31. Interese Exam ■ No	benefits; unpaid loans you Give specific information sts in insurance policies ples: Health, disability, or life insu	Net wages for work performed yet unpaid, est. urance; health savings account (HSA); credit, homeowner's, or renter's insure of each policy and list its value.	\$750.00
□ No ■ Yes. 31. Interex Exam ■ No □ Yes. 32. Any in If you some ■ No	benefits; unpaid loans you Give specific information sts in insurance policies ples: Health, disability, or life insurance company o Company	Net wages for work performed yet unpaid, est. urance; health savings account (HSA); credit, homeowner's, or renter's insure of each policy and list its value.	system should be
□ No ■ Yes. 31. Interese Exam ■ No □ Yes. 32. Any inflyou somes ■ No □ Yes. 33. Claims	benefits; unpaid loans you Give specific information sts in insurance policies ples: Health, disability, or life insurance company of Company sterest in property that is due y are the beneficiary of a living true one has died. Give specific information s against third parties, whether	Net wages for work performed yet unpaid, est. urance; health savings account (HSA); credit, homeowner's, or renter's insur of each policy and list its value. or name: Beneficiary:	system should be
□ No □ Yes. 31. Interese Exam □ No □ Yes. 32. Any infiguous omee □ No □ Yes. 33. Claims Exam □ No	benefits; unpaid loans you Give specific information sts in insurance policies ples: Health, disability, or life insurance company of Company sterest in property that is due y are the beneficiary of a living true one has died. Give specific information s against third parties, whether	Net wages for work performed yet unpaid, est. urance; health savings account (HSA); credit, homeowner's, or renter's insure of each policy and list its value. In name: Beneficiary: You from someone who has died st, expect proceeds from a life insurance policy, or are currently entitled to reconstruction.	system should be
□ No ■ Yes. 31. Interese Exam ■ No □ Yes. 32. Any infifyou somese No □ Yes. 33. Claimse Exam ■ No □ Yes. 34. Other	benefits; unpaid loans you Give specific information sts in insurance policies ples: Health, disability, or life insu Name the insurance company o Company sterest in property that is due y are the beneficiary of a living true one has died. Give specific information s against third parties, whether ples: Accidents, employment disp Describe each claim	Net wages for work performed yet unpaid, est. urance; health savings account (HSA); credit, homeowner's, or renter's insure of each policy and list its value. In name: Beneficiary: You from someone who has died st, expect proceeds from a life insurance policy, or are currently entitled to reconstruction.	\$750.00 ance Surrender or refund value: eceive property because
□ No □ Yes. 31. Interese Exam □ No □ Yes. 32. Any infly you some □ No □ Yes. 33. Claims Exam □ No □ Yes. 34. Other □ No	benefits; unpaid loans you Give specific information sts in insurance policies ples: Health, disability, or life insu Name the insurance company o Company sterest in property that is due y are the beneficiary of a living true one has died. Give specific information s against third parties, whether ples: Accidents, employment disp Describe each claim	Net wages for work performed yet unpaid, est. urance; health savings account (HSA); credit, homeowner's, or renter's insur of each policy and list its value. If name: Beneficiary: You from someone who has died st, expect proceeds from a life insurance policy, or are currently entitled to restrict the putes, insurance claims, or rights to sue	\$750.00 ance Surrender or refund value: eceive property because
□ No ■ Yes. 31. Interese Exam ■ No □ Yes. 32. Any infly you some ■ No □ Yes. 33. Claims ■ Exam ■ No □ Yes. 34. Other ■ No □ Yes. 35. Any fi	benefits; unpaid loans you Give specific information sts in insurance policies ples: Health, disability, or life insu Name the insurance company of Company sterest in property that is due y are the beneficiary of a living true one has died. Give specific information s against third parties, whether ples: Accidents, employment disples: Describe each claim contingent and unliquidated claim	Net wages for work performed yet unpaid, est. urance; health savings account (HSA); credit, homeowner's, or renter's insure of each policy and list its value. In name: Beneficiary: You from someone who has died st, expect proceeds from a life insurance policy, or are currently entitled to respect proceeds from a life insurance policy, or are currently entitled to respect to the putes, insurance claims, or rights to sue laims of every nature, including counterclaims of the debtor and rights	\$750.00 ance Surrender or refund value: eceive property because
□ No ■ Yes. 31. Interese Exam ■ No □ Yes. 32. Any inf If you some No □ Yes. 33. Claims Exam ■ No □ Yes. 34. Other ■ No □ Yes. 35. Any fit ■ No	benefits; unpaid loans you Give specific information sts in insurance policies ples: Health, disability, or life insu Name the insurance company of Company sterest in property that is due y are the beneficiary of a living true one has died. Give specific information s against third parties, whether ples: Accidents, employment disp Describe each claim contingent and unliquidated cl	Net wages for work performed yet unpaid, est. urance; health savings account (HSA); credit, homeowner's, or renter's insure of each policy and list its value. In name: Beneficiary: You from someone who has died st, expect proceeds from a life insurance policy, or are currently entitled to respect proceeds from a life insurance policy, or are currently entitled to respect to the putes, insurance claims, or rights to sue laims of every nature, including counterclaims of the debtor and rights	\$750.00 ance Surrender or refund value: eceive property because

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Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$1,500.00 \$625.00

\$11,295.00

Copy personal property total

57. Part 3: Total personal and household items, line 15 Part 4: Total financial assets, line 36 \$4,570.00 Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 \$0.00

Part 7: Total other property not listed, line 54 \$4,600.00

54. Add the dollar value of all of your entries from Part 7. Write that number here

61.

63. Total of all property on Schedule A/B. Add line 55 + line 62

Total personal property. Add lines 56 through 61...

\$11,295.00

\$11,295.00

\$4,600.00

Official Form 106A/B Schedule A/B: Property page 5

Debtor 1	Jessica Joy Anne	e Clingenpeel		
	First Name	Middle Name	Last Name	
Debtor 2				
Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON	1	
Case number				
if known)				Check if this is an amended filing

Part 1: Identify the Property You Claim as Exempt

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	which set of exemptions are you claiming? Check one only, even it your spouse is filing with you.							
	☐ You are claiming state and federal nonbar	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)				
	You are claiming federal exemptions. 11	U.S.C. § 522(b)(2)						
2.	For any property you list on Schedule A/B that you claim as exempt, fill in the information below.							
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption			
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.				
	2002 GMC Yukon 195000 miles	\$1,500.00		\$1,500.00	11 U.S.C. § 522(d)(2)			
	Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit				
	General household goods,	\$500.00		\$500.00	11 U.S.C. § 522(d)(3)			
	furnishings and electronics, est. Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit				
	Clothing, est. Line from Schedule A/B: 11.1	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)			
	Line IIIIII Scriedule PAB. 11.1			100% of fair market value, up to any applicable statutory limit				
	Jewelry, est. Line from Schedule A/B: 12.1	\$25.00		\$25.00	11 U.S.C. § 522(d)(4)			
	Line Holli Schedule AVB. 12.1			100% of fair market value, up to any applicable statutory limit				
	savings: Oregon Community Credit Union, est.	\$3,000.00		\$3,000.00	11 U.S.C. § 522(d)(5)			
	Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit				

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

De	ebtor 1 Jessica Joy Anne Clingenpeel			Case number (if known)	<u></u>
	Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
	checking: Oregon Community Cred Union, est.	it \$20.00	\$20.00		11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
	Security deposit with EPUD, est. Line from Schedule A/B: 22.1	\$400.00		\$400.00	11 U.S.C. § 522(d)(5)
	Line from Schedule AVD. 22.1			100% of fair market value, up to any applicable statutory limit	
	Security deposit with landlord, est. Line from Schedule A/B: 22.2	\$400.00		\$400.00	11 U.S.C. § 522(d)(5)
	Line IIIIII Schedule AVD. 22.2			100% of fair market value, up to any applicable statutory limit	
	Net wages for work performed yet unpaid, est.	\$750.00		\$750.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 30.1			100% of fair market value, up to any applicable statutory limit	
	Garnished funds in past 90 days. Es	st. Unknown		\$1,500.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: 53.1			100% of fair market value, up to any applicable statutory limit	
	Garnished funds for student loans i past 90 days: \$4600.	n \$4,600.00		\$4,600.00	11 U.S.C. § 522(d)(5)
	Line from Schedule A/B: 53.2			100% of fair market value, up to any applicable statutory limit	
3.	Are you claiming a homestead exemptio (Subject to adjustment on 4/01/22 and ever			led on or after the date of adjustmer	nt.)
	■ No				
	☐ Yes. Did you acquire the property cov	ered by the exemption wi	ithin 1	,215 days before you filed this case	?
	□ No	, ,		, , , , , , , , , , , , , , , , , , , ,	
	☐ Yes				

						4/02/19 7:53PN
Fill	in this information to identi	fy your case:				
Deh	tor 1 Jessica Jo	y Anne Clingenpeel				
	First Name	Middle Name	Last Name			
Deb	tor 2					
(Spot	use if, filing) First Name	Middle Name	Last Name			
Unit	ed States Bankruptcy Court f	or the: DISTRICT OF OREG	ON			
Cas	e number					
(if kno					☐ Check	if this is an
					amend	ded filing
∩ff	icial Form 106D					
		\\// O -	-! C	las a Dagasa a sata	_	
<u> 5c</u>	neaule D: Creali	ors Who Have Cla	aims Secured	by Property	<u>y </u>	12/15
is ne		sible. If two married people are fil , fill it out, number the entries, and				
	any creditors have claims secu	ured by your property?				
	_ •	bmit this form to the court with y	our other schedules. You	u have nothing else to	o report on this form.	
	Yes. Fill in all of the inform	•		a mare menining elec in		
Pari				Column A	Column B	Column C
		or has more than one secured claim, itor has a particular claim, list the oth		Amount of claim	Value of collateral	Unsecured
		phabetical order according to the cre		Do not deduct the value of collateral.	that supports this	portion If any
2.1	The Equitable Finance					,
2.1	Company	Describe the property tha	t secures the claim:	\$3,750.00	\$0.00	\$3,750.00
	Creditor's Name					
	7052 SW Nyberg Street	As of the date you file, the	claim is: Check all that			
	Tualann, OR 97062	apply. Contingent				
	Number, Street, City, State & Zip Coo	·				
	rambon, on oon, only, onto a 2.p oon	Disputed				
Who	o owes the debt? Check one.	Nature of lien. Check all t	hat apply.			
_		_	,	d		
	Debtor 1 only	An agreement you made car loan)	e (such as mortgage or secu	irea		
	Debtor 2 only	_ ′				
_	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as ta				
_	at least one of the debtors and and					
	Check if this claim relates to a community debt	☐ Other (including a right t	o offset)			
Date	debt was incurred	Last 4 digits of acc	ount number			
			41-4	**	0.00	
	•	es in Column A on this page. Write		\$3,75	0.00	
	his is the last page of your forn ite that number here:	n, add the dollar value totals from	an pages.	\$3,75	0.00	
Dow	Liet Others to Be Notif	ied for a Daht That Van Alasa	dy Liotod			
LEC III	THE LIST OTHERS TO DE NOTH	ied for a Debt That You Alread	ay ∟iSteu			

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

				4/02/19 7:53PM
Fill in this infor	mation to identify your	case:		
Debtor 1	Jessica Joy Anne	Clingenpeel		1
	First Name	Middle Name	Last Name	
Debtor 2		NC LIL N		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF ORE	GON	
Case number				
(if known)				☐ Check if this is an
				amended filing
Official For	m 106E/F			
	E/F: Creditors W	ho Have Unse	ecured Claims	12/15
			ith PRIORITY claims and Part 2 for creditors with NO	
left. Attach the Co name and case nu	ntinuation Page to this pag	e. If you have no inform	re space is needed, copy the Part you need, fill it out, nation to report in a Part, do not file that Part. On the	
	tors have priority unsecure			
■ No. Go to				
Yes.	r un z.			
	All of Your NONPRIORIT	Y Unsecured Claims		
	tors have nonpriority unsec			
			e court with your other schedules.	
Yes.	ave nearing to report in this p			
unsecured cla	im, list the creditor separately	/ for each claim. For each	I order of the creditor who holds each claim. If a credin claim listed, identify what type of claim it is. Do not list open 3. If you have more than three nonpriority unsecured to the control of the co	laims already included in Part 1. If more
				Total claim
4.1 Capita	l One Bank USA NA	Last 4 d	ligits of account number	\$537.00
•	ity Creditor's Name	When w	ras the debt incurred?	
	X 30281 ake City, UT 84130	wnen w	ras the debt incurred?	
	Street City State Zip Code	As of th	e date you file, the claim is: Check all that apply	
Who inc	urred the debt? Check one.			
Debto	or 1 only	☐ Cont	ingent	
☐ Debto	or 2 only	☐ Unliq	quidated	
☐ Debto	or 1 and Debtor 2 only	☐ Dispe	uted	
☐ At lea	ast one of the debtors and and	JU101	NONPRIORITY unsecured claim:	
	k if this claim is for a com	munity	ent loans	
debt	nim auhiaat ta affaat?		gations arising out of a separation agreement or divorce t	hat you did not
Is the cia	aim subject to offset?	•	s priority claims is to pension or profit-sharing plans, and other similar del	nte
			, , ,	oro
☐ Yes		■ Othe	r. Specify Misc. consumer debt.	

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 8

4/02/19 7:53PM Case number (if known) Debtor 1 Jessica Joy Anne Clingenpeel 4.2 Last 4 digits of account number **Central Credit Services LLC** \$0.00 Nonpriority Creditor's Name 9550 Regency Square Blvd #500 When was the debt incurred? Jacksonville, FL 32225 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Notice ☐ Yes 4.3 **Enterprise Rent a Car** Last 4 digits of account number \$350.00 Nonpriority Creditor's Name When was the debt incurred? 600 Corporate Park Drive Saint Louis, MO 63105 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Misc. debt. Other. Specify 4.4 **Eugene Water & Electric Board** Last 4 digits of account number \$0.00 Nonpriority Creditor's Name When was the debt incurred? PO BOX 10148 Eugene, OR 97440 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one.

Debtor 1 only

Debtor 2 only

Debtor 1 and Debtor 2 only

☐ At least one of the debtors and another

☐ Check if this claim is for a community

debt

Is the claim subject to offset?

■ No ☐ Yes ☐ Contingent

■ Unliquidated

☐ Disputed

Type of NONPRIORITY unsecured claim:

☐ Student loans

 \square Obligations arising out of a separation agreement or divorce that you did not

report as priority claims

Debts to pension or profit-sharing plans, and other similar debts

■ Other. Specify Notice

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 8

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4/02/19 7:53PM Case number (if known) Debtor 1 Jessica Joy Anne Clingenpeel 4.5 Last 4 digits of account number \$289.00 Fred Meyer/Kroger Nonpriority Creditor's Name 3800 S.E. 22nd Avenue When was the debt incurred? Portland, OR 97202 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims \square Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Misc. debt. ☐ Yes 4.6 **LVNV Funding LLC** Last 4 digits of account number \$8,171.29 Nonpriority Creditor's Name When was the debt incurred? **POB 10497** Greenville, SC 29603 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Misc. debt. Other. Specify 4.7 **Neurology Associates** Last 4 digits of account number \$44.00 Nonpriority Creditor's Name When was the debt incurred? 3355 Riverbend Dr Ste 410 Springfield, OR 97477 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent

Official Form 106 E/F

Debtor 2 only

debt

■ No

☐ Yes

Debtor 1 and Debtor 2 only

Is the claim subject to offset?

☐ At least one of the debtors and another

☐ Check if this claim is for a community

Schedule E/F: Creditors Who Have Unsecured Claims

■ Unliquidated

☐ Student loans

report as priority claims

Type of NONPRIORITY unsecured claim:

■ Other. Specify Medical service

☐ Obligations arising out of a separation agreement or divorce that you did not

Debts to pension or profit-sharing plans, and other similar debts

☐ Disputed

Deblo	Jessica Joy Anne Clingenpeel	Case number (if known)	
4.8	Oregon Medical Group Nonpriority Creditor's Name	Last 4 digits of account number	\$1,107.00
	1580 Valley River Drive Eugene, OR 97401	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical service	
4.9	Peacehealth Laboratories	Last 4 digits of account number	\$159.00
	Nonpriority Creditor's Name POB 77003	When was the debt incurred?	
	Springfield, OR 97475 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.	,	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	□ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Misc. consumer debt.	
4.1			
4.1 0	Professional Credit Service	Last 4 digits of account number	\$0.00
	Nonpriority Creditor's Name PO BOX 7548 Eugene, OR 97401	When was the debt incurred?	
	Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	■ Debtor 1 only	☐ Contingent	
	☐ Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	☐ Yes	■ Other. Specify Notice	

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Schedule E/F: Creditors Who Have Unsecured Claims

4/02/19 7:53PM Case number (if known) Debtor 1 Jessica Joy Anne Clingenpeel 4.1 **Radius Global Solutions LLC** \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 7831 Glenroy Rd Ste 250-A When was the debt incurred? Minneapolis, MN 55439 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only ☐ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts ☐ Yes ■ Other. Specify Notice 4.1 Ray Klein Inc \$900.00 Last 4 digits of account number Nonpriority Creditor's Name 400 International Way #100 When was the debt incurred? Springfield, OR 97477 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No Debts to pension or profit-sharing plans, and other similar debts Other. Specify Misc. debt. ☐ Yes 4.1 **United Finance** \$221.00 Last 4 digits of account number

Nonpriority Creditor's Name 1142 Willagillespie Rd #2 When was the debt incurred? Eugene, OR 97401 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated ☐ Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No $\hfill\square$ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Misc. consumer debt. ☐ Yes

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

4/02/19 7:53PM Debtor 1 Jessica Joy Anne Clingenpeel Case number (if known) 4.1 **US Department Of Education** \$5,176.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 5609 When was the debt incurred? Greenville, TX 75403 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ☐ Contingent Debtor 1 only ■ Unliquidated Debtor 2 only ☐ Disputed Debtor 1 and Debtor 2 only Type of NONPRIORITY unsecured claim: At least one of the debtors and another Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims Debts to pension or profit-sharing plans, and other similar debts ■ No ☐ Yes Other. Specify Student loan obligation 4.1 **US Department of Education** \$0.00 Last 4 digits of account number 5 Nonpriority Creditor's Name When was the debt incurred? **National Payment Center** POB 790336 Concord, CA 94524 Number Street City State Zip Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt \square Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Notice Other. Specify Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address **Cso Financial Inc** Line 4.5 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims **POB 1208** Part 2: Creditors with Nonpriority Unsecured Claims Roseburg, OR 97470 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Lane County Circuit Court Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Case# 701320361 ■ Part 2: Creditors with Nonpriority Unsecured Claims 125 E 8th Ave Eugene, OR 97401 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Lane County Circuit Court** Line 4.6 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims Case# 120808013

125 E 8th Ave

Eugene, OR 97401

Name and Address

Part 2: Creditors with Nonpriority Unsecured Claims

Last 4 digits of account number

On which entry in Part 1 or Part 2 did you list the original creditor?

Schedule E/F: Creditors Who Have Unsecured Claims Official Form 106 E/F

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			4/02/13 7.331 W
Debtor 1 Jessica Joy Anne Clingenpeel		Case number (if known)	
Peacehealth Medical Group PO BOX 24410	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Eugene, OR 97402	Last 4 digits of account number	Part 2: Creditors with Nonpriority Unsecured Claims	
Name and Address Portfolio Recovery Associates Llc	On which entry in Part 1 or Part 2 did Line 4.1 of (<i>Check one</i>):	you list the original creditor? □ Part 1: Creditors with Priority Unsecured Claims	
POB 12914 Norfolk, VA 23541		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address Professional Credit Service	On which entry in Part 1 or Part 2 did	,	
PO BOX 7548	Line 4.9 of (Check one):	☐ Part 1: Creditors with Priority Unsecured Claims ☐ Part 2: Creditors with Nonpriority Unsecured Claims	
Eugene, OR 97401	Last 4 digits of account number	— 1 art 2. Creditors with Nonphority Onsecured Claims	
Name and Address Professional Credit Service	On which entry in Part 1 or Part 2 did Line 4.8 of (<i>Check one</i>):	you list the original creditor? Part 1: Creditors with Priority Unsecured Claims	
PO BOX 7548	and <u>and</u> or (or room or roy).	Part 2: Creditors with Nonpriority Unsecured Claims	
Eugene, OR 97401	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	you list the original creditor?	
Professional Credit Service PO BOX 7548	Line 4.7 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Eugene, OR 97401		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did	•	
Suttell & Hammer PS POB C-90006	Line 4.6 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Bellevue, WA 98009		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did		
Transworld Systems Inc 9525 Sweet Valley Drive	Line 4.3 of (Check one):	Part 1: Creditors with Priority Unsecured Claims	
Valley View, OH 44125		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		
Name and Address	On which entry in Part 1 or Part 2 did		
United Finance Co POB 87	Line 4.13 of (<i>Check one</i>):	Part 1: Creditors with Priority Unsecured Claims	
Seaside, OR 97138		■ Part 2: Creditors with Nonpriority Unsecured Claims	
	Last 4 digits of account number		

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
6a.	Domestic support obligations	6a.	\$	0.00
6b.	Taxes and certain other debts you owe the government	6b.	\$	0.00
6c.	Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$	0.00
6e.	Total Priority. Add lines 6a through 6d.	6e.	\$	0.00
				Total Claim
6f.	Student loans	6f.	\$	5,176.00
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	\$	11,778.29
	6b. 6c. 6d. 6e. 6f.	 6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6e. Total Priority. Add lines 6a through 6d. 6f. Student loans 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6c. 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. 6e. Total Priority. Add lines 6a through 6d. 6e. 6f. Student loans 6f. 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6h.	6b. Taxes and certain other debts you owe the government 6c. Claims for death or personal injury while you were intoxicated 6d. Other. Add all other priority unsecured claims. Write that amount here. 6d. \$ 6e. Total Priority. Add lines 6a through 6d. 6f. \$ 6f. Student loans 6f. \$ 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar debts 6b. \$ 6c. \$ 6d. \$ 6d

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

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Debtor 1 Jessica Joy Anne Clingenpeel

Case number (if known)

here

6j. Total Nonpriority. Add lines 6f through 6i.

6j.

16,954.29

Fill in this infor	mation to identify your	case:		
Debtor 1	Jessica Joy Anne	Clingenpeel		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON		
Case number (if known)				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease
Name, Number, Street, City, State and ZIP Code

2.1 Progressive Leasing
256 West Data Drive
Draper, UT 84020

State what the contract or lease is for
Furniture

					4/02/19 7:53PM
Fill in this	information to identify your	case:			
Debtor 1	Jessica Joy Ann	e Clingenpeel			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filin	g) First Name	Middle Name	Last Name		
	-				
United Stat	es Bankruptcy Court for the:	DISTRICT OF OREGON	<u> </u>		
Case numb	per				☐ Check if this is an amended filing
Sched	Form 106H ule H: Your Cod		ts you may have Re a	s complete and accur	12/15 ate as possible. If two married
people are fill it out, ar your name	filing together, both are equ nd number the entries in the and case number (if known	ally responsible for supp boxes on the left. Attach). Answer every question.	lying correct informati the Additional Page to	ion. If more space is no this page. On the top	needed, copy the Additional Page, o of any Additional Pages, write
1. Do y	ou have any codebtors? (If	you are filing a joint case, c	to not list either spouse	as a codebtor.	
■ No □ Yes					
Arizona	nin the last 8 years, have you a, California, Idaho, Louisiana Go to line 3. . Did your spouse, former spo	, Nevada, New Mexico, Pัน	erto Rico, Texas, Washi		y states and territories include
in line Form 1	2 again as a codebtor only	if that person is a guarant	or or cosigner. Make	sure you have listed th	g with you. List the person shown ne creditor on Schedule D (Official Schedule E/F, or Schedule G to fill
	Column 1: Your codebtor lame, Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lin	е
	Name			□ Schedule E/F, I	
				☐ Schedule G, lin	e
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, lin	e
	Name			☐ Schedule E/F, I☐ Schedule G, lin	
	Number Street City	State	ZIP Code	_	

Schedule H: Your Codebtors

SIII	in this information to identify you	ir caso.								
	, ,	loy Anne Clingenpeel								
	otor 2 				_					
Uni	ted States Bankruptcy Court for	the: DISTRICT OF OREG	ON							
	se number nown)		-			☐ An		d filing ent showin	g postpetition	
0	fficial Form 106I					MN	Л / DD/ Y	YYY		
S	chedule I: Your Ir	come								12/15
spo atta	plying correct information. If y use. If you are separated and ch a separate sheet to this for the Describe Employment information.	your spouse is not filing w m. On the top of any additi	ith you, do not inclu	ıde infor	mati	on about y d case nur	your spo mber (if I	ouse. If mo known). A	ore space is	needed,
			■ Employed				Emplo		ing spouse	
	If you have more than one job attach a separate page with information about additional	Employment status	☐ Not employed				□ Not e	-		
	employers.	Occupation	Cashier							
	Include part-time, seasonal, o self-employed work.	Employer's name	Fiddler's Green	Golf C	ο.					
	Occupation may include stude or homemaker, if it applies.	ent Employer's address	91292 State Hw Eugene, OR 97	-						
		How long employed t	here? 2 years	s, 1 moı	nth,	est.	_			
Esti	mate monthly income as of thuse unless you are separated.	•	you have nothing to	report for	any	line, write S	\$0 in the	space. Inc	clude your no	n-filing
	ou or your non-filing spouse have e space, attach a separate shee		ombine the information	on for all	empl	oyers for th	nat perso	n on the li	nes below. If	you need
						For Debt	or 1		btor 2 or ng spouse	
2.	List monthly gross wages, s deductions). If not paid month			2.	\$	1,9	989.26	\$	N/A	
3.	Estimate and list monthly or	vertime pay.		3.	+\$		0.00	+\$	N/A	
4.	Calculate gross Income. Ad	d line 2 + line 3.		4.	\$	1,989	9.26	\$	N/A	

Official Form 106I Schedule I: Your Income page 1

ebtor 1	Jessica Joy Anne Clingenpeel		Case r	number (<i>if known</i>)		
			For	Debtor 1		ebtor 2 or ling spouse
Co	py line 4 here	4.	\$	1,989.26	\$	N/A
5. Li s	et all payroll deductions:					
5a	Tax, Medicare, and Social Security deductions	5a.	\$	93.72	\$	N/A
5b	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	N/A
5c	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	N/A
5d	Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
5e	Insurance	5e.	\$	0.00	\$	N/A
5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A
5g	Union dues	5g.	\$	0.00	\$	N/A
5h	Other deductions. Specify:	5h.+	\$	0.00	+ \$	N/A
. Ac	d the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$	93.72	\$	N/A
Ca	Iculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	1,895.54	\$	N/A
	profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
8b	Interest and dividends	8b.	\$	0.00	\$	N/A
8c	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A
8d		8d.	\$-	0.00	\$	N/A
8e	, ,	8e.	\$	0.00	\$	N/A
8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: food stamps/SNAP	8f.	\$	260.00	\$	N/A
8g	Pension or retirement income	_ 8g.	\$	0.00	\$	N/A
8h	Other monthly income. Specify:	8h.+	\$	0.00	+ \$	N/A
Ac	d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	260.00	\$	N/A
). C a	Iculate monthly income. Add line 7 + line 9.	10. \$	2	2,155.54 + \$		N/A = \$ 2,

Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 11. 0.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 2,155.54 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

Eill	in this informe	tion to identify yo	OUR CASO:			1			
Deb	tor 1	Jessica Joy	Anne Cli	ngenpeel		Ch		this is: amended filing	
Deb	otor 2						A su	upplement shov	ving postpetition chapter
(Spo	ouse, if filing)						13 €	expenses as of	the following date:
Unit	ed States Bankr	ruptcy Court for the	: DISTRI	CT OF OREGON			MM	/ DD / YYYY	
	e number								
Of	fficial Fo	rm 106J							
S	chedule	J: Your	Exper	ses					12/1
Be info	as complete a	and accurate as	s possible. eded, atta	If two married people a ch another sheet to this					
Par		ibe Your House	∍hold						
1.	Is this a join								
	■ No. Go to		in a conar	ate household?					
	□ res. Doe		iii a sepai	ate nousenoid:					
	=	-	st file Offici	al Form 106J-2, Expenses	s for Separate House	ehold of De	ebtor 2	2.	
2.	Do vou have	e dependents?	□ No						
	Do not list Do Debtor 2.	•	Yes.	Fill out this information for each dependent	Dependent's relati			Dependent's age	Does dependent live with you?
	Do not state				Doughton				□ No
	dependents	names.			Daughter			5	■ Yes □ No
					Son			9	■ Yes
					Son			16	□ No ■ Yes
									■ res □ No
									☐ Yes
3.	expenses of	enses include f people other t d your depende	han 🗆	No Yes					
Par		ate Your Ongoi							
exp				uptcy filing date unless y y is filed. If this is a supp					
the	value of such	n assistance an		government assistance sluded it on <i>Schedule I:</i>				Your expe	enses
(On	ficial Form 10	lb1.)						Tour exp	
4.		or home owners and any rent for th		ses for your residence. I	Include first mortgage	e 4.	\$_		499.00
	If not includ	led in line 4:							
	4a. Real e	estate taxes				4a.	\$		0.00
	4b. Prope	rty, homeowner's	s, or renter	's insurance		4b.			0.00
			•	ipkeep expenses		4c.			0.00
5		owner's associat		dominium dues our residence, such as ho	nme equity loans	4d. 5.			0.00

Debtor 1 <u>Jessica</u>	Joy Anne Clingenpeel	Case number (if known)	
6. Utilities:			
	, heat, natural gas	6a. \$	110.00
6b. Water, se	wer, garbage collection	6b. \$	0.00
6c. Telephone	e, cell phone, Internet, satellite, and cable services	6c. \$	0.00
6d. Other. Sp	ecify: cell phone	6d. \$	60.00
Food and hous	ekeeping supplies	7. \$	500.00
Childcare and	children's education costs	8. \$	0.00
Clothing, laund	ry, and dry cleaning	9. \$	100.00
). Personal care	products and services	10. \$	100.00
. Medical and de	ntal expenses	11. \$	50.00
. Transportation	Include gas, maintenance, bus or train fare.		
Do not include o		12. \$	200.00
. Entertainment,	clubs, recreation, newspapers, magazines, and books	13. \$	100.00
. Charitable con	ributions and religious donations	14. \$	0.00
. Insurance.			
	surance deducted from your pay or included in lines 4 or 2		
15a. Life insura		15a. \$	0.00
15b. Health ins		15b. \$	0.00
15c. Vehicle in			130.00
15d. Other insu		15d. \$	0.00
	clude taxes deducted from your pay or included in lines 4 of		
Specify:		16. \$	0.00
. Installment or I		47- 0	
	ents for Vehicle 1		265.00
	ents for Vehicle 2	17b. \$	0.00
17c. Other. Sp	-	17c. \$	0.00
17d. Other. Sp	· · · · · · · · · · · · · · · · · · ·	17d. \$	0.00
	of alimony, maintenance, and support that you did not		0.00
	your pay on line 5, <i>Schedule I, Your Income</i> (Official Fo s you make to support others who do not live with you.		0.00
Specify:	s you make to support others who do not live with you.	19.	0.00
	erty expenses not included in lines 4 or 5 of this form of		
	s on other property	20a. \$	0.00
20b. Real esta		20b. \$	0.00
	homeowner's, or renter's insurance	20c. \$	0.00
	nce, repair, and upkeep expenses	20d. \$	0.00
	er's association or condominium dues	20e. \$	
	ers association of condominating dues	21. +\$	0.00
. Other: Specify:			0.00
. Calculate your	monthly expenses		
22a. Add lines 4			4.00
22b. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Forr		
	a and 22b. The result is your monthly expenses.	\$ 2,11	4.00
		<u> </u>	
•	monthly net income.		
	12 (your combined monthly income) from Schedule I.	<u></u>	155.54
23b. Copy you	monthly expenses from line 22c above.	23b\$ 2,	114.00
	our monthly expenses from your monthly income.	23c. \$	41.54
The result	is your monthly net income.	۷۵۵. [۴	71.07
For example, do you modification to the	an increase or decrease in your expenses within the ye ou expect to finish paying for your car loan within the year or do you terms of your mortgage?		ecause of a
No.			
☐ Yes.	Explain here: Debtor will be moving to new reside	nce: budget will most likely fluctuate.	

Fill in this infor	mation to identify your	case:		
Debtor 1	Jessica Joy Anne	Clingenpeel		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	DISTRICT OF OREGON		
Case number				
(if known)				☐ Check if this is an
				amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

	Sign Below		
Did	you pay or agree to pay someone who is NOT an attorney to	help	you fill out bankruptcy forms?
	No		
	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)
	er penalty of perjury, I declare that I have read the summary a they are true and correct.	and s	chedules filed with this declaration and
х /	s/ Jessica Joy Anne Clingenpeel	X	
	Jessica Joy Anne Clingenpeel Signature of Debtor 1		Signature of Debtor 2
[Date April 2, 2019		Date

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

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Best Case Bankruptcy

Debtor 1	lossica lov Anno	Clingonnool				
PEDIOI I	Jessica Joy Anne	Middle Name	Last Name			
Debtor 2 Spouse if, filing)	First Name	Middle Name	Last Name			
Inited States Ba	nkruptcy Court for the:	DISTRICT OF OREGON				
Case number _					heck if this is an mended filing	
e as complete a	of Financial A and accurate as possib nore space is needed, a	le. If two married people are t	als Filing for Bankruptcy iling together, both are equally responsi form. On the top of any additional page	ible for supp		4/
<u> </u>	n). Answer every quest Details About Your Mar	ion. ital Status and Where You Liv	red Before			
. What is you	r current marital status	i?				
What is you Married		?				
☐ Married ■ Not man	rried		are you live now?			
☐ Married ☐ Not man During the la ☐ No ☐ Yes. Lis	rried ast 3 years, have you li	ved anywhere other than where other than where other than where other than where the desired in the last 3 years. Do not in the Dates Debtor 1	•		Dates Debtor	<u>?</u>
☐ Married ☐ Not man During the la ☐ No ☐ Yes. Lis	rried ast 3 years, have you liver all of the places you liverior Address:	ved anywhere other than whe	clude where you live now.		Dates Debtor : lived there Same as Deb From-To:	
☐ Married ☐ Not man During the la ☐ No ☐ Yes. Lis Debtor 1 Pr 88118 5th	rried ast 3 years, have you liver all of the places you liver address: Street R 97487 Road	red in the last 3 years. Do not in Dates Debtor 1 lived there From-To: About 3/2017 -	clude where you live now. Debtor 2 Prior Address:		lived there ☐ Same as Deb	tor 1

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

	uary 1 to December 31, 2018)	Personal injury settlement	\$3,300.00		
	uary 1 to December 31, 2018)				
	ast calendar year:	Food stamps/SNAP est.	Unknown		
	n January 1 of current year until late you filed for bankruptcy:	Food stamps/SNAP est. YTD	\$780.00		
		Debtor 1 Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Debtor 2 Sources of income Describe below.	Gross income (before deductions and exclusions)
	Yes. Fill in the details.				
	□ No				
	ist each source and the gross inco		- -		
lı a	Did you receive any other income nclude income regardless of wheth and other public benefit payments; vinnings. If you are filing a joint cas	er that income is taxable. Exappensions; rental income; inter	amples of other income are a rest; dividends; money collect	ted from lawsuits; royalties; ar	
		☐ Operating a business		☐ Operating a business	
	he calendar year before that: uary 1 to December 31, 2017)	■ Wages, commissions, bonuses, tips	\$14,367.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	ast calendar year: uary 1 to December 31, 2018)	■ Wages, commissions, bonuses, tips	\$24,261.00	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	
	n January 1 of current year until late you filed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$5,866.09	☐ Wages, commissions, bonuses, tips	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
	Yes. Fill in the details.	Debtor 1		Debtor 2	
[□ No				
F	Did you have any income from er Fill in the total amount of income you f you are filing a joint case and you	ou received from all jobs and a	all businesses, including part-	time activities.	ndar years?

Statement of Financial Affairs for Individuals Filing for Bankruptcy

П Case title

No

Case number

Yes. Fill in the details.

Nature of the case

Status of the case

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Court or agency

☐ Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address:

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

Yes. Fill in the details for each gift or contribution.

Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)

Describe what you contributed

Dates you contributed Value

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

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Pai	rt 6: List Certain Losses						
15.	Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?						
	□ No						
	Yes. Fill in the details.						
	Describe the property you lost and		eribe any insurance coverage for the loss de the amount that insurance has paid. List pending		Date of your loss	Value of property lost	
	Debtor was involved in accident - GMC Yukon sustained damage, insurance paid for repairs, plus personal injury settlement	insura	ance claims on line 33 of <i>Schedule A/B: Pi</i>	roperty.	2017	Unknown	
	Within 1 year before you filed for bankr consulted about seeking bankruptcy or	uptcy, o	ing a bankruptcy petition?			rty to anyone you	
	Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. □ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You ccadvising.com		Description and value of any property transferred Credit Counseling Course		Date payment or transfer was made	Amount of payment \$14.76	
					4/2/2019		
	Butcher Law Office, LLC 116 Highway 99 N #101 Eugene, OR 97402		Bankruptcy legal fee		4/2/2019	\$700.00	
17.	Within 1 year before you filed for bankr promised to help you deal with your cree Do not include any payment or transfer that	ditors	or to make payments to your creditors?		r transfer any prope	rty to anyone who	
	■ No						
	Yes. Fill in the details.						
	Person Who Was Paid Address		Description and value of any proper transferred	ty	Date payment or transfer was made	Amount of payment	
18.	Within 2 years before you filed for bank transferred in the ordinary course of yo Include both outright transfers and transfer include gifts and transfers that you have a	ur busi rs made	ness or financial affairs? as security (such as the granting of a sec	• • •	• • •		
	■ No □ Yes. Fill in the details.						
			Decementary and value of	Describe		Data transfer	
	Person Who Received Transfer Address		Description and value of property transferred		nny property or received or debts change	Date transfer was made	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 5

Person's relationship to you

19.	Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) No Yes. Fill in the details.				
	Name of trust	Description and v	alue of the prop	perty transferred	Date Transfer was made
Par	List of Certain Financial Accounts, Inst	truments, Safe Deposi	t Boxes, and Sto	orage Units	
20.	Within 1 year before you filed for bankruptcy sold, moved, or transferred? Include checking, savings, money market, or houses, pension funds, cooperatives, associated No	r other financial accou	nts; certificates	of deposit; shares in ba	
	Yes. Fill in the details.				
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	nt or Date account closed, sold, moved, or transferred	was Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yo cash, or other valuables?	ear before you filed for	r bankruptcy, an	y safe deposit box or otl	ner depository for securities,
	■ No □ Yes. Fill in the details.				
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)		Who else had access to it? Address (Number, Street, City, State and ZIP Code)		Do you still have it?
22.	Have you stored property in a storage unit or	r place other than your	home within 1	year before you filed for	bankruptcy?
	■ No □ Yes. Fill in the details.				
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)		Describe the contents	Do you still have it?
Par	t 9: Identify Property You Hold or Control f	or Someone Else			
23.	Do you hold or control any property that som for someone.	neone else owns? Incl	ude any propert	y you borrowed from, ar	e storing for, or hold in trust
	■ No □ Yes. Fill in the details.				
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the prop (Number, Street, City, S Code)		Describe the property	Value
Par	t 10: Give Details About Environmental Info	rmation			
For	the purpose of Part 10, the following definition	ns apply:			
	Environmental law means any federal, state, toxic substances, wastes, or material into the regulations controlling the cleanup of these	e air, land, soil, surfac	e water, ground		
	Site means any location, facility, or property to own, operate, or utilize it, including dispos	-	environmental la	aw, whether you now ow	n, operate, or utilize it or used
	Hazardous material means anything an envir hazardous material, pollutant, contaminant, o		as a hazardous	waste, hazardous subst	ance, toxic substance,
Rep	ort all notices, releases, and proceedings that	t you know about, rega	ardless of when	they occurred.	

Statement of Financial Affairs for Individuals Filing for Bankruptcy

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an enviro					lation of an environm	ental law?			
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		ental law, if you	Date of notice			
25. Have you notified any governmental unit of any release of hazardous material?									
		No Yes. Fill in the details.							
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)		ental law, if you	Date of notice			
26.	Hav	e you been a party in any judicial or adr	ninistrative proceeding under any envi	ronmental law?	? Include settlements	and orders.			
		No Yes. Fill in the details.							
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the	case	Status of the case			
Par	t 11:	Give Details About Your Business or	Connections to Any Business						
27.	With	nin 4 years before you filed for bankrupt	cy, did you own a business or have an	y of the followi	ng connections to an	y business?			
		☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time							
		☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)							
		☐ A partner in a partnership							
		☐ An officer, director, or managing executive of a corporation							
		☐ An owner of at least 5% of the voting or equity securities of a corporation							
		No. None of the above applies. Go to Part 12.							
		_							
	Bu	siness Name	Describe the nature of the business		Employer Identification number				
		dress mber, Street, City, State and ZIP Code)	Name of accountant or bookkeeper	me of accountant or bookkeeper Do not include Social Secu Dates business existed		ity number or ITIN.			
 Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone abou institutions, creditors, or other parties. 				t your business? Incl	ude all financial				
		No Yes. Fill in the details below.							
		me dress nber, Street, City, State and ZIP Code)	Date Issued						

Statement of Financial Affairs for Individuals Filing for Bankruptcy

■ No

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_form

s.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court District of Oregon

In re	Jessica Joy Anne Clingenpeel		Case No.	
		Debtor(s)	Chapter	7
	VERIFI	CATION OF CREDITOR	MATRIX	
The ab	ove-named Debtor hereby verifies that t	the attached list of creditors is true and o	correct to the best	of his/her knowledge.
Date:	April 2, 2019	/s/ Jessica Joy Anne Clingen Jessica Joy Anne Clingenpee		